

## NEW APPLICATION TRANSMITTAL FORM

To the Commissioner for Patents:

This is a Request for filing a NON-PROVISIONAL patent application under 37 CFR 1.53(b) entitled **DELIVERY OF AN ACTIVE DRUG TO THE POSTERIOR PART OF THE EYE VIA SUBCONJUNCTIVAL OR PERIOcular DELIVERY OF A PRODRUG** by the following named inventor:

<b>1</b>	Full Name of Inventor	Last Name: <b>HUGHES</b>	First Name: <b>PATRICK</b>	Middle Name: <b>M.</b>	
	Residence and Citizenship	City: <b>ALISO VIEJO</b>	State or Foreign Country: <b>CALIFORNIA</b>	Country Of Citizenship: <b>U.S.A.</b>	
	Post Office Address	Post Office Address: <b>2 SOMERSET DRIVE</b>	City: <b>ALISO VIEJO</b>	State or Country: <b>CALIFORNIA</b>	Zip Code: <b>92656</b>
<b>2</b>	Full Name of Inventor	Last Name: <b>OLEJNIK</b>	First Name: <b>OREST</b>	Middle Name:	
	Residence and Citizenship	City: <b>COTO DE CAZA</b>	State or Foreign Country: <b>CALIFORNIA</b>	Country Of Citizenship: <b>U.S.A.</b>	
	Post Office Address	Post Office Address: <b>5 ADDINGTON PLACE</b>	City: <b>COTO DE CAZA</b>	State or Country: <b>CALIFORNIA</b>	Zip Code: <b>92679</b>
<b>3</b>	Full Name of Inventor	Last Name:	First Name:	Middle Name:	
	Residence and Citizenship	City:	State or Foreign Country:	Country Of Citizenship:	
	Post Office Address	Post Office Address:	City:	State or Country:	Zip Code:

(X) The Commissioner is hereby authorized to use Deposit Account Number 01-0885 for the payment of any extension fees incurred during the prosecution of this application.

(X) Enclosed is a specification of 23 pages, 20 claims (3 pages) and an abstract (1 page).

## Oath or Declaration

- (X) Enclosed is a fully executed oath or declaration.
- ( ) Enclosed is an unsigned oath or declaration.
- (X) A self-addressed return postcard is enclosed for verification of receipt.
- (X) The filing fee is calculated below:

FOR	NUMBER FILED	NUMBER EXTRA	RATE	FEE
Basic Fee (Large entity)			\$750.00	\$750.00
Total Claims	20 minus 20 =	-0-	\$18.00	\$.00
Independent Claims	3 minus 3 =	-0-	\$84.00	\$.00
If application contains any multiple dependent claims, then add			\$280.00	\$.00
<b>TOTAL FILING FEE</b>				<b>\$750.00</b>

- (X) The Commissioner is hereby authorized to charge the filing fee and excess claim fees (including multiple dependent claim fee) as stated above to Deposit Account No. 01-0885. If this amount is incorrect, or for payment of any other fees that may be incurred as a result of this communication please use said Deposit Account. A duplicate copy of this sheet is enclosed for that purpose.
- (X) An Assignment with the Recordation Cover Sheet, bestowing all interest in this application to Allergan, Inc., is enclosed.
- (X) New drawing(s) are enclosed - 10 sheets.
- ( ) A Statement Pursuant to 37 CFR §1.821(f) and a labeled diskette containing the computer readable sequence listing is enclosed.
- ( ) A Statement Pursuant to 37 CFR §1.821(e), stating that the paper copy and the computer readable form are identical is filed herewith.
- ( ) A properly labeled computer readable form of the Sequence Listing accompanies this Application.
- (X) The Power of Attorney in this application is to Brent A. Johnson, Registration Number 51,851.
- (X) The Power of Attorney appears in the Combined Declaration and Power of Attorney, filed herewith.
- ( ) A copy of the Request for Extension of Time filed in the prior application is enclosed.

Please address all future communications to:

BRENT A. JOHNSON  
Registration No. 51,851  
ALLERGAN, INC.  
2525 Dupont Drive, T2-7H  
Irvine, CA 92612  
Tel: 714-246-4348 Fax: 714-246-4249

Respectfully submitted,



Date: July 10, 2003

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Brent A. Johnson  
Registration No. 51,851  
Patent Agent of Record

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Applicant: PATRICK M. HUGHES, et al.,	)	Examiner:
	)	
Serial No.: Pending	)	Group Art Unit:
	)	
Filed: Herewith	)	
	)	
For: DELIVERY OF AN ACTIVE DRUG TO	)	
THE POSTERIOR PART OF THE EYE	)	Irvine, California
VIA SUBCONJUNCTIVAL OR	)	
PERIOcular DELIVERY OF A	)	
PRODRUG	)	
	)	

**NON-PROVISIONAL PATENT APPLICATION TRANSMITTAL LETTER**

Mail Stop: Patent Application  
Commissioner for Patents  
P.O. Box 1450  
Alexander, VA 22313-1450

Sir/Madam:

Enclosed herewith are the following documents:

- (x) Transmittal Letter – 4 pgs.
- (x) Specification 23 pages total) consisting of 20 Claims ( 3 pgs) Abstract (1 page)
- (x) Drawings, color, informal (10 sheets)
- (x) Declaration/Power of Attorney
- (x) Assignment with Recordation Cover Sheet
- ( ) Information Disclosure Statement with cited art
- (x) Return/postage paid Postcard
- (x) Express Mail Certificate No. EV295682191US

Dated: 7/10/03



BRENT A. JOHNSON  
Registration No. 51,851

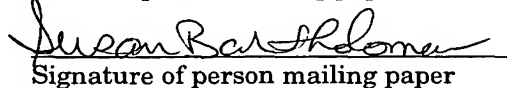
**CERTIFICATE OF EXPRESS MAIL UNDER 37 C.F.R. §1.10**

I hereby certify that the above-identified documents are being deposited with the United States Postal Service on **July 10, 2003** in an envelope as "Express Mail Post Office To Addressee" mailing label number EV295682191US with sufficient postage for Express Mail addressed to MS: Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Date: July 10, 2003

Susan Bartholomew

Name of person mailing paper

  
Signature of person mailing paper